Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 1 of 51

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | | |
|----|---|---|---|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 1. | Your full name | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Carolyn First name | First name | - | |
| | license or passport). | Middle name | Middle name | | |
| | Bring your picture identification to your meeting with the trustee. | West Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | | |
| 2. | All other names you have used in the last 8 years | | | | |
| | Include your married or maiden names. | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4007 | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 2 of 51

Debtor 1 Carolyn West

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINS | EINs |
| 5. | Where you live | 10630 S Aberdeen Street | If Debtor 2 lives at a different address: |
| | | Chicago, IL 60643 Number, Street, City, State & ZIP Code | Number Street City State 9 71D Code |
| | | Cook | Number, Street, City, State & ZIP Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

Page 3 of 51 Document Case number (if known) **Carolyn West** Debtor 1 Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the ☐ Yes. last 8 years? When Case number District When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

■ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36

Desc Main Document Page 4 of 51 Case number (if known) Debtor 1 Carolyn West Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. What is the hazard? of imminent and

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Carolyn West

Document Page 5 of 51

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 6 of 51

Case number (if known) **Carolyn West** Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Do you estimate that ☐ Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1.000-5.000 1** 25.001-50.000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$500,000,001 - \$1 billion □ \$0 - \$50,000 □ \$1,000,001 - \$10 million estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carolyn West Signature of Debtor 2 **Carolyn West** Signature of Debtor 1 Executed on February 2, 2018 Executed on MM / DD / YYYY MM / DD / YYYY

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 7 of 51

Debtor 1 Carolyn West

Document Page 7 of 51

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Edwin | L Feld | Date | February 2, 2018 | |
|-----------------|------------------------|---------------|------------------|--|
| Signature of | f Attorney for Debtor | | MM / DD / YYYY | |
| Edwin L F | eld 6188070 | | | |
| Edwin L F | eld & Associates, LLC | | | |
| Firm name | | | | |
| 1 N LaSall | le Street | | | |
| Suite 1225 | 5 | | | |
| Chicago, I | IL 60602 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 312-263-2100 | Email address | | |
| 6188070 II | L | | | |
| Bar number & S | tate | | | |

Document Page 8 of 51 Fill in this information to identify your case: **Carolyn West** Middle Name First Name Last Name First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the:

> ☐ Check if this is an amended filing

Official Form 106Sum

Debtor 1

Debtor 2

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your a Value o | ssets of what you own |
|------------|--|-------------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 157,840.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 12,330.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 170,170.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 169,016.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 14,173.00 |
| | Your total liabilities | \$ | 183,189.00 |
| Par | t 3: Summarize Your Income and Expenses | | |
| ١. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,487.00 |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,047.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| S . | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other so | chedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 9 of 51

Debtor 1 Carolyn West Document Page 9 of 51
Case number (if known)

| From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$_ | 6,508.00 |
|--|-----|----------|
| | | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total | claim |
|--|-------|-------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Case 18-03019 | Doc 1 | Filed 02/02/1 Document | .8 Entered 02/02/ Page 10 of 51 | 18 11:26:36 | Desc M | 1ain |
|-------------------------------|--|-------------------|------------------------------|--|---|--------------|------------------------------------|
| Fill in this | information to identify yo | our case and t | his filing: | | | | |
| Debtor 1 | Carolyn West | | | | | | |
| 5 1 | First Name | Middle | e Name | Last Name | | | |
| Debtor 2 (Spouse, if filin | ng) First Name | Middle | e Name | Last Name | | | |
| United Stat | tes Bankruptcy Court for the | e: NORTHER | N DISTRICT OF IL | LINOIS | | | |
| Case numb | per | | | | | | Check if this is an amended filing |
| | Form 106A/B | | | | | | |
| Sched | dule A/B: Pro | perty | | | | | 12/15 |
| Part 1: Des | scribe Each Residence, Build | ing, Land, or Otl | ner Real Estate You (| | e and case number (if | known). An | swer every question |
| 1.1 | | | What is the prope | erty? Check all that apply | | | |
| | 0 S Aberdeen St | | ■ Single-fam | ily home | Do not deduct secure | ed claims or | exemptions. Put the |
| Street a | ddress, if available, or other descrip | tion | ш . | multi-unit building um or cooperative | amount of any secure Creditors Who Have | | |
| Chica | ago IL 6 | 0643-0000 | ☐ Manufactu | red or mobile home | Current value of the entire property? | | rent value of the ion you own? |
| City | State | ZIP Code | ☐ Investment | property | \$157,840.0 | - | \$157,840.00 |
| · | | | ☐ Timeshare ☐ Other | ' ' ' | Describe the nature of your ownership inter (such as fee simple, tenancy by the entiretie | | nership interest |
| | | | Who has an inter Debtor 1 o | est in the property? Check one | a life estate), if know | vn. | |
| Cook | (| | Debtor 2 o | • | | | |
| County | | | Debtor 1 a | nd Debtor 2 only | Observation to the desire to | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.......

\$157,840.00

Check if this is community property

(see instructions)

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

☐ At least one of the debtors and another

property identification number: Zillow MV (1/22/18)

Primary residence

Other information you wish to add about this item, such as local

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 11 of 51 Case number (if known) **Carolyn West** Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Chevy Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Impala** Creditors Who Have Claims Secured by Property. Model Debtor 1 only 2008 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 71,000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another w/lien \$6,500.00 \$6,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevy Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Cobalt Model Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2010 Debtor 2 only +000,000 Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage miles entire property? portion you own? Other information: ☐ At least one of the debtors and another jointly owned w/son who pays \$0.00 \$0.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$6,500.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe.....

\$1,000.00 Furnishings

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

2 TVs, I Pad

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

\$600.00

| | Case 18-0301 | 9 Doc 1 | Filed 02/02/18 Document | Entered 02/02/18 11:26 Page 12 of 51 | :36 Desc Main |
|--|--|--------------------|--|---|---|
| Debtor 1 | Carolyn West | | Document | Case number (if | known) |
| ☐ Yes. | Describe | | | | |
| Example No | ent for sports and hobes: Sports, photographic musical instruments Describe | c, exercise, and o | other hobby equipment; | bicycles, pool tables, golf clubs, skis; | canoes and kayaks; carpentry tools; |
| □ No | | guns, ammunition | n, and related equipmen | ıt | |
| | pisto | ol | | | \$500.00 |
| □ No . | les: Everyday clothes, f | furs, leather coat | s, designer wear, shoes | , accessories | Unknown |
| □ No | | costume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watches, | gems, gold, silver |
| | Jew | elry | | | \$500.00 |
| ■ No □ Yes. 14. Any oth ■ No □ Yes. 15. Add th | les: Dogs, cats, birds, h Describe ner personal and hous Give specific information ne dollar value of all of | sehold items you | | ncluding any health aids you did no ny entries for pages you have attac | |
| | cribe Your Financial Ass | | | | |
| Do you ow | n or have any legal oi | r equitable inter | est in any of the follow | ring? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | | our home, in a safe depo | | |
| | | | | Cash | \$30.00 |
| Examp | | | I accounts; certificates of counts with the same institution r | | kerage houses, and other similar |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Page 13 of 51

Case number (if known)

Document Debtor 1 **Carolyn West**

| | | 17.1. | 2 accts - Chase, Chgo Patrolmens CU | \$200.00 |
|-----|---|---|---|---------------------------------------|
| 18. | | or publicly traded stocks, investment accounts with | s n brokerage firms, money market accounts | |
| | ☐ Yes | Institution or issu | uer name: | |
| 19. | Non-publicly traded s and joint venture ■ No | tock and interests in inco | orporated and unincorporated businesses, including an interest in | an LLC, partnership, |
| | | formation about them Name of entity: | | |
| 20 | Negotiable instrument | s include personal checks, nents are those you canno | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them. | |
| | | Issuer name: | | |
| 21. | □ No ′ | IRA, ERISA, Keogh, 401(I | x), 403(b), thrift savings accounts, or other pension or profit-sharing plan | ns |
| | Yes. List each accou | nt separately. Type of account: | Institution name: | |
| | | | Pension | Unknowr |
| | | | e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companies | , or others |
| | ☐ Yes | | Institution name or individual: | |
| 23. | . Annuities (A contract f | or a periodic payment of m | noney to you, either for life or for a number of years) | |
| | ■ No □ Yes | ssuer name and description | n. | |
| 24. | 26 U.S.C. §§ 530(b)(1), | ion IRA, in an account in 529A(b), and 529(b)(1). | a qualified ABLE program, or under a qualified state tuition progra | ım. |
| | ■ No □ Yes | nstitution name and descrip | otion. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | No | | y (other than anything listed in line 1), and rights or powers exerci | sable for your benefit |
| | ☐ Yes. Give specific in | formation about them | | |
| 26 | | | , and other intellectual property ceeds from royalties and licensing agreements | |
| | ☐ Yes. Give specific in | formation about them | | |
| 27. | Examples: Building pe ■ No | | gibles cooperative association holdings, liquor licenses, professional licenses | |
| | ☐ Yes. Give specific in | formation about them | | |
| M | oney or property owed | to you? | | Current value of the portion you own? |

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

| 5. | Case 18-03019 | Doc 1 | Filed 02/02/18 Document | Entered 02/02/18 11:26:36 Page 14 of 51 | Desc Main |
|--------------|---|-----------------|----------------------------|---|----------------------------|
| Deb | tor 1 Carolyn West | | | Case number (if known) | |
| | Tax refunds owed to you I No Yes. Give specific information al | bout them, in | cluding whether you alre | eady filed the returns and the tax years | |
| | | Тах | refund (2017) | | \$3,000.00 |
| | Family support Examples: Past due or lump sum No Yes. Give specific information | | ousal support, child supp | ort, maintenance, divorce settlement, propert | y settlement |
| | Other amounts someone owes y Examples: Unpaid wages, disabili benefits; unpaid loans No Yes. Give specific information | ty insurance | | efits, sick pay, vacation pay, workers' compe | ensation, Social Security |
| | I No I Yes. Name the insurance compa | | | HSA); credit, homeowner's, or renter's insura Beneficiary: | nce Surrender or refund |
| | | , , | | bellelicially. | value: |
| | <u>Terr</u> | n policy | | | \$0.00 |
| | Any interest in property that is d If you are the beneficiary of a livin someone has died. No Yes. Give specific information | g trust, expe | | ed surance policy, or are currently entitled to rec | eive property because |
| | Examples: Accidents, employment No | nt disputes, ir | | it or made a demand for payment s to sue | |
| 34. (| | | f every nature, includin | g counterclaims of the debtor and rights t | o set off claims |
| _ | No Yes. Describe each claim | | | | |
| _ | Any financial assets you did not ■ No | already list | | | |
| | Yes. Give specific information | | | | |
| 36. | Add the dollar value of all of yo for Part 4. Write that number h | | | ny entries for pages you have attached | \$3,230.00 |
| | | | | | |
| Part | 5: Describe Any Business-Related | Property You | Own or Have an Interest In | ı. List any real estate in Part 1. | |

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Go to line 38.

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Page 15 of 51

Case number (if known) Document Debtor 1 **Carolyn West** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$157,840.00 Part 2: Total vehicles, line 5 \$6,500.00 Part 3: Total personal and household items, line 15 57. \$2,600.00 58. Part 4: Total financial assets, line 36 \$3,230.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$12,330.00 Copy personal property total \$12,330.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$170,170,00

| | | DUGUITIE | III PAUE 10 UI 3 | <u>/ 1</u> |
|---|--------------------------|-------------------|------------------|-----------------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Carolyn West | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

| Part 1: | dentify the | Property You | Claim as | Exempt |
|---------|-------------|---------------------|----------|--------|
|---------|-------------|---------------------|----------|--------|

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

| Schedule A/B that lists this property | portion you own | | | |
|--|-------------------------------------|-----|---|-----------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 10630 S Aberdeen St Chicago, IL 60643 Cook County | \$157,840.00 | | \$15,000.00 | 735 ILCS 5/12-901 |
| Zillow MV (1/22/18) | | | 100% of fair market value, up to any applicable statutory limit | |
| Primary residence | | | , | |
| Line from Schedule A/B: 1.1 | | | | |
| Furnishings Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| Line nom Schedule A/B. 0.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2 TVs, I Pad Line from Schedule A/B: 7.1 | \$600.00 | | \$600.00 | 735 ILCS 5/12-1001(b) |
| Line from Gonedate 74 B. T. I | | | 100% of fair market value, up to any applicable statutory limit | |
| pistol Line from Schedule A/B: 10.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(d) |
| Line from Schedule A/B. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing (not marketable) Line from Schedule A/B: 11.1 | Unknown | | 100% | 735 ILCS 5/12-1001(a) |
| Line Horr Scriedule AVD. 11.1 | | | 100% of fair market value, up to | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 17 of 51
Case number (if known)

| De | Cardiyii vvest | | | | |
|----|--|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Jewelry Line from Schedule A/B: 12.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli Governov V.S. 1211 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Cash Line from Schedule A/B: 16.1 | \$30.00 | | \$30.00 | 735 ILCS 5/12-1001(b) |
| | Line Holli Genedale A.B. 1911 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 2 accts - Chase, Chgo Patrolmens CU | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Pension Line from Schedule A/B: 21.1 | Unknown | | 100% | 735 ILCS 5/12-1006 |
| | Line Holl Schedule A.B. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Tax refund (2017) Line from Schedule A/B: 28.1 | \$3,000.00 | | \$1,670.00 | 735 ILCS 5/12-1001(b) |
| | Elle Holli Govedale /V.B. 2011 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Term policy Line from Schedule A/B: 31.1 | \$0.00 | | 100% | 215 ILCS 5/238 |
| | Line Holli Governova, C. C. C. | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | iled on or after the date of adjustme | ent.) |
| | ■ No | , . , | | | , |
| | ☐ Yes. Did you acquire the property cove | red by the exemption w | ithin 1 | ,215 days before you filed this case | 9? |
| | □ No | | | | |
| | Π Yes | | | | |

| | Document | Page 18 | 3 of 51 | | |
|--|--|-----------------------------|------------------------------------|--|--------------------|
| Fill in this information to identify | y your case: | | | | |
| Debtor 1 Carolyn We | st | | | | |
| First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court fo | or the: NORTHERN DISTRICT OF IL | LINOIS | | | |
| | | | | | |
| Case number | | | | ☐ Check | if this is an |
| (a tale.iii) | | | | _ | led filing |
| | | | | umene | ica iiiiig |
| Official Form 106D | | | | | |
| | ors Who Have Claims | Secured | hy Property | A. | 12/15 |
| Scriedale D. Crediti | ors who have claims | Jecui ec | a by Fropert | <u>y</u> | 12/13 |
| | ible. If two married people are filing together | | | | |
| needed, copy the Additional Page, till known). | it out, number the entries, and attach it to t | nis form. On the | top of any additional p | ages, write your name ar | nd case number (if |
| 1. Do any creditors have claims secure | ed by your property? | | | | |
| <u> </u> | omit this form to the court with your other | r schedules Y | ou have nothing else | to report on this form | |
| _ | • | 1 Soricadics. 1 | od nave notning cloc | to report on this form. | |
| Yes. Fill in all of the information | | | | | |
| Part 1: List All Secured Claim | is | | Oak was A | Onlywer D | 0-1 |
| | has more than one secured claim, list the cree | | | Column B | Column C |
| | as a particular claim, list the other creditors in all order according to the creditor's name. | Part 2. As much | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | G | | value of collateral. | claim | if any |
| 2.1 Car Max Auto Finance | Describe the property that secures | | \$4,000.00 | \$0.00 | \$4,000.00 |
| Creditor's Name | 2010 Chevy Cobalt 90,000+ | miles | | | |
| | jointly owned w/son who pa | ave | | | |
| PO Box 440609 | As of the date you file, the claim is: | | | | |
| Kennesaw, GA 30160 | apply. | | | | |
| Number, Street, City, State & Zip Code | Contingent Unliquidated | | | | |
| Number, Street, City, State & Zip Coul | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | ☐ An agreement you made (such as | mortgage or secu | ured | | |
| Debtor 2 only | car loan) | 0 0 | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| At least one of the debtors and anoth | her | | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | | |
| community debt | | | | | |
| Date debt was incurred | Last 4 digits of account num | ber | | | |
| | | | | | |
| 2.2 Santander | Describe the property that secures | the claim: | \$5,772.00 | \$6,500.00 | \$0.00 |
| Creditor's Name | 2008 Chevy Impala 71,000 r | | | | |
| | w/lien | | | | |
| | As of the date you file, the claim is: | Check all that | | | |
| PO Box 105255 | apply. | Officer all triat | | | |
| Atlanta, GA 30348 | Contingent | | | | |
| Number, Street, City, State & Zip Code | | | | | |
| Who owes the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | | |
| _ | | months = - | una d | | |
| Debtor 1 only | An agreement you made (such as car loan) | mortgage or secu | urea | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | chanic's lien) | | | |
| At least one of the debtors and anoth | | manic s li c ii) | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | | |
| community debt | 2 | | | | |
| Date debt was incurred 2010 | Last 4 digits of account num | her | | | |
| Date dept has mounted ZUIU | East + digits of account fluin | JU. | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Page 19 of 51 Document

| Debtor 1 Carolyn West | C | Case number (if know) | | | | |
|---|---|-----------------------|--------------|------------|--|--|
| First Name Middle N | Name Last Name | | | | | |
| 2.3 Towne Mortgage | Describe the property that secures the claim: | \$159,244.00 | \$157,840.00 | \$1,404.00 | | |
| Creditor's Name | 10630 S Aberdeen St Chicago, IL 60643 Cook County Zillow MV (1/22/18) | | | | | |
| | Primary residence | | | | | |
| 2170 E Big Beaver Rd A | As of the date you file, the claim is: Check all that | | | | | |
| Troy, MI 48083 | apply. ☐ Contingent | | | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | | | |
| | ☐ Disputed | | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secu car loan) | red | | | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | | | |
| Date debt was incurred | Last 4 digits of account number | | | | | |
| | | | | | | |
| • | olumn A on this page. Write that number here: | \$169,016. | 00 | | | |
| If this is the last page of your form, add | the dollar value totals from all pages. | \$169,016. | 00 | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 0430 10 00013 | Documen | t Page 20 of 51 | 30 Main |
|--------------------------------|---|------------------------------------|--|-------------------------|
| Fill in this | information to identify your | | | |
| Debtor 1 | Carolyn West | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | |
| | 3 , | | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT O | F ILLINOIS | |
| Case numb | per | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| Official F | Form 106E/F | | | |
| | le E/F: Creditors W | ho Have Unsecur | od Claims | 12/15 |
| | | | PRITY claims and Part 2 for creditors with NONPRIORITY claim | |
| the Continuat number (if kn | tion Page to this page. If you have | e no information to report in a | d, copy the Part you need, fill it out, number the entries in the Part, do not file that Part. On the top of any additional pages, | |
| | creditors have priority unsecured | | | |
| | Go to Part 2. | | | |
| ☐ Yes. | 50 to 1 dit 2. | | | |
| | ist All of Your NONPRIORIT | Y Unsecured Claims | | |
| 3. Do any o | creditors have nonpriority unsecu | ured claims against you? | | |
| □ No. Y | ou have nothing to report in this pa | art. Submit this form to the court | with your other schedules. | |
| ■ Yes. | | | • | |
| claim, lis | t the creditor separately for each cl | aim. For each claim listed, identi | of the creditor who holds each claim. If a creditor has more than fy what type of claim it is. Do not list claims already included in Pamore than three nonpriority unsecured claims fill out the Continua | art 1. If more than one |
| | ookwood Loans | Last 4 digits of | f account number | \$1,500.00 |
| 344 | priority Creditor's Name 40 Preston Ridge Rd #100 |) When was the | debt incurred? | _ |
| | pharetta, GA 30005 nber Street City State Zlp Code | As of the date | you file, the claim is: Check all that apply | |
| | o incurred the debt? Check one. | _ | you me, and oranine or one an anat appry | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | RIORITY unsecured claim: | |
| | At least one of the debtors and ano | • • | | |
| | Check if this claim is for a comme claim subject to offset? | | arising out of a separation agreement or divorce that you did not | |
| = 1 | • | | nsion or profit-sharing plans, and other similar debts | |
| | | Other. Spec | ify Signature loan | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 21 of 51

Debtor 1 Carolyn West Case number (if know) 4.2 Cap One Last 4 digits of account number \$722.00 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **CCS First Natl Bank** Last 4 digits of account number \$539.00 Nonpriority Creditor's Name 506 E 60th St N When was the debt incurred? Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.4 **Chicago Patrolmens FCU** Last 4 digits of account number \$3,734.00 Nonpriority Creditor's Name 1359 W Washington Blvd When was the debt incurred? Chicago, IL 60607 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Signature Ioan

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 22 of 51
Case number (if know)

| Debioi | Carolyli West | Case Humber (II know) | |
|--------|---|---|----------|
| 4.5 | Chicago Patrolmens FCU | Last 4 digits of account number | \$551.00 |
| | Nonpriority Creditor's Name 1359 W Washington Blvd Chicago, IL 60607 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | O continuent | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Signature loan | |
| 4.6 | Great American Finance | Last 4 digits of account number | \$220.00 |
| _ | Nonpriority Creditor's Name 20 W Wacker Dr, Suite 2275 | When was the debt incurred? | |
| | Chicago, IL 60606 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | По и | |
| | ■ Debtor 1 only | Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Signature loan | |
| 4.7 | Macys | Last 4 digits of account number | \$947.00 |
| | Nonpriority Creditor's Name PO Box 8218 | When was the debt incurred? | |
| | Mason, OH 45040 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | · | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other, Specify Credit Card | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 23 of 51 Case number (if know)

| Debioi | Cardiyii west | Case Humber (II NIOW) | |
|--------|--|---|------------|
| 4.8 | Merrick Bank | Last 4 digits of account number | \$1,348.00 |
| | Nonpriority Creditor's Name PO Box 5000 Praper LIT 84020 | When was the debt incurred? | |
| | Draper, UT 84020 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | • | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | |
| 4.9 | Opportunity Loans | Last 4 digits of account number | \$2,538.00 |
| | Nonpriority Creditor's Name 1 Prudential Plaza | When was the debt incurred? | |
| | 130 E Randolph #1650 Chicago, IL 60601 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Signature loan | |
| 4.10 | Personal Finance Mariner | Last 4 digits of account number | \$999.00 |
| | Nonpriority Creditor's Name | | |
| | 5465 S 76th St Greendale, WI 53129 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | Пол | |
| | Debtor 1 only | Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Signature Ioan | |
| | | · · · | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 24 of 51

| Carolyn west | Case number (if know) | |
|---|---|-----------|
| Webbank Fingerhut | Last 4 digits of account number | \$1,075.0 |
| Nonpriority Creditor's Name | When we the delt in some 10 | |
| 6250 Ridgewood Saint Cloud. MN 56303 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | Пол | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|-----------------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | Ch | Towns and senting other debts were sure the necessary | CI- | • | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you | | | |
| HOIII I dit 2 | og. | did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 14,173.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 14,173.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| | | Docume | III PAUE 25 01 51 | <u> </u> |
|---|-------------------------|-------------------|-------------------|-----------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Carolyn West | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| I | Person or | company with | whom you have the r, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| 2.0 | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | · | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | • | | | | |

| | 450 10 00015 | Docume | nt Page 26 of | 51 | .00 Best Main | |
|--------------------------------------|---|---|-------------------------|--|--|---------|
| Fill in this info | rmation to identify your | case: | | | | |
| Debtor 1 | Carolyn West | | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number (if known) | | | | | ☐ Check if this is a amended filing | an |
| O((:-:-1 E- | 40011 | | | | g | |
| | orm 106H | -1-4 | | | | |
| Schedule | H: Your Code | eptors | | | | 12/15 |
| fill it out, and no your name and | umber the entries in the case number (if known) | | the Additional Page to | this page. On the to | needed, copy the Addition op of any Additional Pages | • |
| ■ Yes | | | | | | |
| | | lived in a community pro Nevada, New Mexico, Pue | | | ty states and territories inclu) | ıde |
| ■ No. Go to | o line 3. | | | | | |
| | | ise, or legal equivalent live | with you at the time? | | | |
| in line 2 ag | ain as a codebtor only i), Schedule E/F (Official | f that person is a guarant | tor or cosigner. Make s | ure you have listed | ng with you. List the perso the creditor on Schedule I , Schedule E/F, or Schedu | Officia |
| | nn 1: Your codebtor Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedul | editor to whom you owe the that apply: | ie debt |
| 3.1 Dext | er West | | | ■ Schedule D, I □ Schedule E/F □ Schedule G _ Car Max Auto F | , line | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 27 of 51

| Fill | in this information to ident | ify your ca | ase: | | | | | | | | |
|---------------------|---|--|--|--|--------------------|--------------|-------------------------------|-----------------------|-----------------------|-----------------------------|-------------------|
| Del | otor 1 Caro | lyn Wes | t | | | _ | | | | | |
| | otor 2 | | | | | _ | | | | | |
| Uni | ted States Bankruptcy Cou | urt for the | NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | | |
| _ | se number nown) | | | | | | | mended oplemen | t showin | ng postpetition | |
| 0 | fficial Form 106 | SI | | | | | | DD/ YY | | o o | |
| S | chedule I: You | – r Inco | ome | | | | IVIIVI / | ווי (טט | | | 12/15 |
| sup spo atta | as complete and accurate plying correct information use. If you are separated chase separate sheet to the describe Employers. | on. If you and you is form. (loyment | are married and not fili r spouse is not filing w | ng jointly, and your ith you, do not incl | spouse ude info | is li mat | ving with you ion about yo | u, inclue our spou | de infor ıse. If m | mation abou ore space is | t your needed, |
| 1. | Fill in your employmen information. | t | | Debtor 1 | | | De | btor 2 o | r non-fi | iling spouse | |
| | If you have more than or | | Employment status | ■ Employed | | | | Employ | ed | | |
| | attach a separate page vinformation about addition | | Employment status | ☐ Not employed | | | | Not emp | ployed | | |
| | employers. | | Occupation | Sheriff | | | | | | | |
| | Include part-time, seaso self-employed work. | nal, or | Employer's name | Cook County | | | | | | | |
| | Occupation may include or homemaker, if it appli | | Employer's address | Attn: Payroll De 118 N. Clark, R Chicago, IL 606 | m 500 | ent | | | | | |
| | | | How long employed to | here? 26 yrs | | | | | | | |
| Par | rt 2: Give Details Al | bout Mon | thly Income | | | | | | | | |
| Esti spoi | mate monthly income as use unless you are separa ou or your non-filing spouse | of the dated. | ate you file this form. If | , | · | | | | • | • | J |
| mor | e space, attach a separate | sheet to | this form. | | | | For Debtor | 1 | | btor 2 or | |
| 2. | List monthly gross wag deductions). If not paid | | | | 2. | \$ | 6,508 | 8.00 | \$ | N/A | |
| 3. | Estimate and list mont | hly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income | e. Add lir | ne 2 + line 3. | | 4. | \$ | 6,508.0 | 00 | \$ | N/A | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 28 of 51

| Deb | tor 1 | Carolyn West | - | C | ase r | number (<i>if ki</i> | nown) | | | | |
|-----|---------------------------|--|----------|---------|-----------------|-----------------------|--------|--------|------|----------------|------------------|
| | | | | | For | Debtor 1 | | For Do | | 2 or spouse | |
| | Cop | by line 4 here | 4. | | \$ | 6,508 | 3.00 | \$ | 9 | N/A | _ |
| 5. | l ie | t all payroll deductions: | | | | | | | | | |
| 5. | | • • | E o | | c | 4 26 | | ¢ | | NI/A | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a 5b | | \$_ \$ | 1,368 | 1.00 | \$ | | N/A N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 50 | | _{\$} — | | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 50 | | <u>*</u> — | | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e | | \$ | | 9.00 | \$ | - | N/A | _ |
| | 5f. | Domestic support obligations | 5f | | \$ | (| 0.00 | \$ | | N/A | - |
| | 5g. | Union dues | 50 | , | \$ | 4: | 3.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | _ 5h | 1.+ | \$ | (| 0.00 | + \$ | | N/A | <u>-</u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 2,02 | 1.00 | \$ | | N/A | <u>-</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 4,487 | 7.00 | \$ | | N/A | <u>-</u> |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a | а. | \$ | (| 0.00 | \$ | | N/A | <u>.</u> |
| | 8b. | Interest and dividends | 8b |). | \$ | (| 0.00 | \$ | | N/A | <u>-</u> |
| | 8c. 8d. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c 8c | | \$ | | 0.00 | \$ | | N/A N/A | _ |
| | 8e. | Unemployment compensation Social Security | 86 | | \$ | | 0.00 | \$ | | N/A N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | | \$ | | 0.00 | \$ | | N/A | <u>-</u> |
| | 8g. | Pension or retirement income | 89 | , | \$ | | 0.00 | | | N/A | _ |
| | 8h. | Other monthly income. Specify: | _ 8r | ո.+ | \$ | | 0.00 | + \$ | | N/A | <u>-</u> _ |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | | 0.00 | \$ | | N/A | A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,487.00 | + \$ | | N/A | = \$ | 4,487.00 |
| 10. | | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | ,,,,0 7.00 | • • - | | 11// | | 7,707.00 |
| 11. | Sta Incl othe Do | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify: | dep | | | | | • | | le J. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | 12. | \$ | 4,487.00 |
| 13. | | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Combi month | ned ly income |
| | | No. | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 29 of 51

| Fill in | this informat | tion to identify ye | our case. | | | I | | |
|---------|--------------------------------|--|---------------|--|--|---------------------------------------|------------------------------------|--|
| Debtor | | Carolyn Wes | | | | | k if this is: An amended filing | |
| Debtor | _ | | | | | | A supplement show | wing postpetition chapter |
| (Spous | se, if filing) | | | | | | 13 expenses as of | the following date: |
| United | l States Bankru | ptcy Court for the: | NORTH | IERN DISTRICT OF ILLIN | IOIS | _ | MM / DD / YYYY | |
| Case r | number wn) | | | | | | | |
| | | rm 106J | | | | | | |
| | | J: Your | | | | | | 12/15 |
| inforr | mation. If me | | eded, atta | . If two married people a ach another sheet to this n. | | | | |
| Part 1 | Descri | be Your House t case? | ehold | | | | | |
| | ■ No. Go to | | in a separ | ate household? | | | | |
| | □ No □ Ye | | st file Offic | ial Form 106J-2, <i>Expense</i> | s for Separate Hous | ehold of Deb | otor 2. | |
| 2. | Do you have | dependents? | ■ No | | | | | |
| | Do not list De and Debtor 2 | | ☐ Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| C | dependents r | ames. | | | - | | <u> </u> | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | □ Yes □ No |
| | | | | | | | | ☐ Yes |
| | | enses include | . | No | | | - | |
| | | people other t your depende | | Yes | | | | |
| exper | nate your ex | ate Your Ongoi penses as of you date after the | our bankr | uptcy filing date unless | you are using this f plemental <i>Schedul</i> | form as a su e <i>J</i> , check tl | pplement in a Ch | apter 13 case to report of the form and fill in the |
| the va | | assistance an | | government assistance cluded it on Schedule I: | | | Your exp | enses |
| • | | • | | | | | | |
| | | r home owners d any rent for th | | ses for your residence. or lot. | Include first mortgag | je 4. \$ | | 1,180.00 |
| ŀ | f not includ | ed in line 4: | | | | | | |
| 2 | 4a. Real e | state taxes | | | | 4a. \$ | | 0.00 |
| | • | ty, homeowner's | | | | 4b. \$ | | 0.00 |
| | | maintenance, re owner's associat | • | upkeep expenses dominium dues | | 4c. \$ 4d. \$ | | 130.00 0.00 |
| | | | | our residence, such as ho | ome equity loans | 5. \$ | | 0.00 |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 30 of 51

| Deb | otor 1 | Carolyn | West | Case num | ber (if known) | |
|-----|--------|---------------|---|------------------|-------------------|-----------------------------|
| 6. | Utilit | ies: | | | | |
| 0. | 6a. | | , heat, natural gas | 6a. | \$ | 375.00 |
| | 6b. | | wer, garbage collection | 6b. | \$ | 100.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 360.00 |
| | 6d. | Other. Spe | | 6d. | · | 0.00 |
| 7. | Food | | ekeeping supplies | 7. | · | 375.00 |
| 8. | | | children's education costs | 8. | \$ | 0.00 |
| 9. | | | ry, and dry cleaning | 9. | \$ | 150.00 |
| 10. | | | products and services | 10. | \$ | 200.00 |
| | | | ntal expenses | 11. | \$ | 150.00 |
| 12. | Trans | sportation. | Include gas, maintenance, bus or train fare. | | · - | |
| | Do no | ot include ca | ar payments. | 12. | | 465.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 2.00 |
| 14. | Char | itable cont | ributions and religious donations | 14. | \$ | 240.00 |
| 15. | Insur | | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | | _ | |
| | | Life insura | | 15a. | · | 0.00 |
| | | Health ins | | 15b. | · | 0.00 |
| | | Vehicle ins | | 15c. | \$ | 120.00 |
| | | | ırance. Specify: | 15d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included in lines 4 or 20. | | _ | |
| | Spec | , | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | 47- | c | 0.00 |
| | | | ents for Vehicle 1 | 17a. | * | 0.00 |
| | | | ents for Vehicle 2 | 17b. | | 0.00 |
| | | Other. Spe | | 17c. | · | 0.00 |
| 40 | | Other. Spe | • | 17d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not repo your pay on line 5, Schedule I, Your Income (Official Form 1) | | \$ | 0.00 |
| 19 | Othe | r navments | s you make to support others who do not live with you. | 001). | \$ | 0.00 |
| 10. | Spec | | you make to support officia who do not live with you. | 19. | Ψ | 0.00 |
| 20. | • | · | erty expenses not included in lines 4 or 5 of this form or on | | our Income. | |
| | | | s on other property | 20a. | | 0.00 |
| | | Real estat | | 20b. | \$ | 0.00 |
| | 20c. | Property, h | homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | | | nce, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | | | er's association or condominium dues | 20e. | | 0.00 |
| 21. | Othe | r: Specify: | Additional disposable income | 21. | +\$ | 200.00 |
| | | | • | | . • | |
| 22. | | - | monthly expenses | | | |
| | | | through 21. | | \$ | 4,047.00 |
| | 22b. (| Copy line 22 | 2 (monthly expenses for Debtor 2), if any, from Official Form 106 | 6J-2 | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly expenses. | | \$ | 4,047.00 |
| 22 | Calcu | ulato vour r | monthly net income. | | | |
| 25. | | | 12 (your combined monthly income) from Schedule I. | 23a. | ¢ | 4,487.00 |
| | | | monthly expenses from line 22c above. | 23b. | | 4,047.00 |
| | 200. | Copy your | monthly expenses from line 22c above. | 200. | Ψ | 4,047.00 |
| | 23c. | Subtract v | your monthly expenses from your monthly income. | | | |
| | | | is your monthly net income. | 23c. | \$ | 440.00 |
| | _ | | | | | |
| 24. | | | an increase or decrease in your expenses within the year aft | | | |
| | | | ou expect to finish paying for your car loan within the year or do you expect terms of your mortgage? | your mortgage pa | ayment to increas | se or decrease because of a |
| | ■ No | | terms or your mortgage: | | | |
| | | | Evaleia hava | | | |
| | □ Ye | es. | Explain here: | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 31 of 51

| Fill in this infor | mation to identify your | case: | | | |
|---------------------------------|---|----------------------------|------------------------------|----------------------|---|
| Debtor 1 | Carolyn West | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number _ (if known) | | | | | ☐ Check if this is an amended filing |
| Official Form | | n Individual | Debtor's Sch | edules | 12/15 |
| If two married po | eople are filing togethe | r. both are equally respon | nsible for supplying corre | ect information. | |
| obtaining money | | n connection with a bank | | | ement, concealing property, or 0, or imprisonment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | y or agree to pay some | one who is NOT an attor | ney to help you fill out bar | nkruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare e true and correct. | that I have read the sum | mary and schedules filed | with this declaratio | n and |
| X /s/ Car | olyn West | | X | | |
| Caroly | n West re of Debtor 1 | | Signature of De | ebtor 2 | |
| Date | February 2, 2018 | | Date | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 32 of 51

| Fill i | n this informa | tion to identify you | r case: | | | |
|---------|-------------------------------------|--|---|---|---|---|
| Debt | tor 1 | Carolyn West | Middle Name | LastNama | | |
| Debt | tor 2 | First Name | Middle Name | Last Name | | |
| | se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Bank | ruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Case | e number | | | | | |
| (if kno | | | | | | heck if this is an |
| | | | | | a | mended filing |
| О!! | : -: - 1 🗖 | 407 | | | | |
| | icial Forr | | Affaina fan Individ | luala Filima fan D | | |
| | | | Affairs for Individ | | | 4/10 |
| | | | | | equally responsible for sup | |
| | | re space is needed, . Answer every que: | | this form. On the top of an | y additional pages, write yo | ur name and case |
| Part | 1 Give De | tails About Your Ma | arital Status and Where You | Lived Before | | |
| | | | | 1 11704 101010 | | |
| 1. \ | What is your o | current marital statu | IS? | | | |
| | ☐ Married | | | | | |
| | Not marrie | ed | | | | |
| 2. I | During the las | t 3 years, have you | lived anywhere other than | where you live now? | | |
| | □ No | | | | | |
| Ī | _ | all of the places you | lived in the last 3 years. Do no | ot include where you live nov | v. | |
| | Debtor 1 Prio | r Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dress: | Dates Debtor 2 |
| | 1511 W 73rd Chicago, IL | | From-To: 2009-2016 | ☐ Same as Debtor 1 | | Same as Debtor 1 |
| | Officago, IL | 00000 | | | | 11011110. |
| | s and territories ■ No □ Yes. Make | s include Arizona, Ca | llifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto R | nity property state or territor ico, Texas, Washington and V | |
| | Distance I | | | | | d |
| ı | Fill in the total | amount of income yo | nployment or from operating received from all jobs and a have income that you receive | all businesses, including par | | ndar years? |
| | □ No | | | | | |
| i | _ | n the details. | | | | |
| | _ 100.11111 | rine details. | | | | |
| | | | Debtor 1 | Cross income | Debtor 2 | Crean in a sure |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | f current year until for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$6,195.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 33 of 51

Debtor 1 Carolyn West Document Page 33 of 51 Case number (if known)

| | Debtor 1 | | | Debtor 2 | | |
|---|--|--|--|---|--|---|
| | | s of income Il that apply. | Gross income (before deductions and exclusions) | Sources of ince Check all that a | | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, | Wage bonuses | es, commissions, , tips | \$78,104.00 | ☐ Wages, com bonuses, tips | missions, | |
| | ☐ Opera | ating a business | | ☐ Operating a I | ousiness | |
| For the calendar year befor (January 1 to December 31, | | es, commissions, , tips | \$72,508.00 | ☐ Wages, com bonuses, tips | missions, | |
| | ☐ Opera | ating a business | | ☐ Operating a I | ousiness | |
| unemployment, and othe gambling and lottery win | r public benefit paym nings. If you are filing gross income from e | nents; pensions; rent g a joint case and yo | mples of other income are tal income; interest; divider u have income that you red ely. Do not include income | nds; money collecte ceived together, list | ed from lawsu it only once | uits; royalties; and |
| | Dahtan 4 | | | Dahtar 2 | | |
| | Sources Describe | of income | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| Part 3: List Certain Paym | nents You Made Bef | ore You Filed for E | Bankruptcy | | | |
| individual prin During the 90 No. G Yes L p * Subject to a Tyes. Debtor 1 or I During the 90 No. G Yes L | or 1 nor Debtor 2 hanarily for a personal, days before you filed to to line 7. ist below each credit aid that creditor. Do ot include payments adjustment on 4/01/1 Debtor 2 or both hand days before you filed to line 7. ist below each credit | as primarily consulting family, or household of for bankruptcy, did or to whom you paid not include payment to an attorney for the and every 3 years or to whom you paid or to whom you paid or to whom you paid | mer debts. Consumer debted purpose." I you pay any creditor a total of \$6,425* or more as for domestic support oblinis bankruptcy case. after that for cases filed on mer debts. I you pay any creditor a total of \$600 or more ar | al of \$6,425* or mo in one or more pay gations, such as ch n or after the date of al of \$600 or more? | re? yments and the support a suppor | he total amount you and alimony. Also, do t. |
| | nclude payments for on attorney for this ba | | ligations, such as child sup | oport and alimony. | Also, do not i | include payments to |
| Creditor's Name and A | ddress | Dates of paymen | t Total amount paid | Amount you still owe | Was this p | ayment for |

Page 34 of 51 Case number (if known) Debtor 1 Carolyn West

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | | | |
|-----|--|-------------------------|---------------------|----------------|---------------------------|--|--|--|--|--|--|
| | No☐ Yes. List all payments to an insider. | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount yo | | this payment | | | | | |
| В. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property o | on account of a d | ebt that benefited an | | | | | |
| | No☐ Yes. List all payments to an insider | | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount yo | | this payment litor's name | | | | | |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | , | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | | | | irnished, attache | d, seized, or levied? Value of the property | | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | | ate action was | Amount | | | | | |
| Par | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions Within 2 years before you filed for bankrupt | nother official? | | ion of an assi | gnee for the ben | | | | | | |
| | No☐ Yes. Fill in the details for each gift. | | | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | | ates you gave ne gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 35 of 51 Case number (if known)

| 14. | Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or | | | ns with a tota | I value of more than | \$600 to any charity? | | | | | | |
|-----|---|------------------------------|---|-------------------|---|-----------------------|--|--|--|--|--|--|
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | total | Describe what you contributed | | Dates you contributed | Value | | | | | | |
| Par | t 6: List Certain Losses | | | | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? | | | | | | | | | | | |
| | ■ No | | | | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | | | |
| | Describe the property you lost and how the loss occurred | Include | the any insurance coverage for the little amount that insurance has paid. It is insurance claims on line 33 of Scheoty. | Date of your loss | Value of property lost | | | | | | | |
| Par | t 7: List Certain Payments or Transfer | s | | | | | | | | | | |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No | preparir | ng a bankruptcy petition? | | | erty to anyone you | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | | Description and value of any property transferred | | Date payment or transfer was made | Amount of payment | | | | | | |
| | Edwin L Feld & Associates, LLC 1 N LaSalle Street Suite 1225 Chicago, IL 60602 | | Attorney Fees total \$4000.00; \$200.00 paid prepetition | | 1/29/18 | \$200.00 | | | | | | |
| 17. | Within 1 year before you filed for bankrupromised to help you deal with your cre Do not include any payment or transfer that No Yes. Fill in the details. | ditors o | r to make payments to your creditor | r behalf pay o | or transfer any prope | erty to anyone who | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | perty | Date payment or transfer was made | Amount of payment | | | | | | |
| | Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have al No Yes. Fill in the details. | u r busin s made a | ess or financial affairs? as security (such as the granting of a s | | | | | | | | | |
| | Person Who Received Transfer | | Description and value of | Describe a | any property or | Date transfer was | | | | | | |
| | Address Person's relationship to you | | property transferred | | received or debts | made | | | | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Page 36 of 51 Case number (if known) Document

Carolyn West Debtor 1

| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro | | y property to a se | It-settled trust or sim | ılar device o | f which you are a | | | |
|-----|--|--|----------------------------|--|---------------|-------------------------------|--|--|--|
| | No The state of th | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and v | alue of the proper | ty transferred | | Date Transfer was made | | | |
| D | List of Contain Financial Assessments In | | . D | 11 | | | | | |
| Par | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Stora | ige Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage | | | | | | | | |
| | houses, pension funds, cooperatives, associated No Yes. Fill in the details. | ciations, and other final | ncial institutions. | | | | | | |
| | Name of Financial Institution and | Last 4 digits of | Type of account | or Doto occoun | at was | Last balance | | | |
| | Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | or Date accour closed, sold moved, or transferred | | before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed for | bankruptcy, any s | safe deposit box or o | ther deposit | ory for securities, | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | escribe the contents | | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | |
| | No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | escribe the contents | | Do you still have it? | | | |
| Par | t 9: Identify Property You Hold or Control | for Someone Else | | | | | | | |
| | | | | | | | | | |
| 23. | Do you hold or control any property that so for someone. | meone else owns? Incli | ude any property y | ou borrowed from, a | re storing fo | r, or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | escribe the property | | Value | | | |
| Par | t 10: Give Details About Environmental Info | ormation | | | | | | | |
| or | the purpose of Part 10, the following definiti | ons apply: | | | | | | | |
| | | | | | | | | | |

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Page 37 of 51 Case number (if known) Document

Debtor 1 Carolyn West

| No | | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | |
|---|---|--|---|--|--|--|
| Yes. Fill in the details. | | | | | | |
| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. Have you notified any governmental unit of any release of hazardous material? | | | | | | |
| No Yes. Fill in the details. | | | | | | |
| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| lave you been a party in any judicial or admi | nistrative proceeding under any envir | onmental law? Include settlements | and orders. | | | |
| No Yes. Fill in the details. | | | | | | |
| Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| 11: Give Details About Your Business or C | onnections to Any Business | | | | | |
| Vithin 4 years before you filed for bankruptc | y, did you own a business or have any | of the following connections to any | y business? | | | |
| ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | |
| ☐ A member of a limited liability compa | ny (LLC) or limited liability partnership | p (LLP) | | | | |
| ☐ A partner in a partnership | | | | | | |
| ☐ An officer, director, or managing executive of a corporation | | | | | | |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | |
| No. None of the above applies. Go to Part 12. | | | | | | |
| Yes. Check all that apply above and fill in the details below for each business. | | | | | | |
| | Describe the nature of the business | | | | | |
| | Name of accountant or bookkeeper | Dates business existed | y number or ITIN. | | | |
| Vithin 2 years before you filed for bankruptonstitutions, creditors, or other parties. | y, did you give a financial statement to | o anyone about your business? Incl | ude all financial | | | |
| No | | | | | | |
| Yes. Fill in the details below. | | | | | | |
| Name Address Number, Street, City, State and ZIP Code) | Date Issued | | | | | |
| | Address (Number, Street, City, State and ZIP Code) lave you notified any governmental unit of a No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) lave you been a party in any judicial or admided and site and | Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Address (Number, Street, City, State and ZIP Code) Nature of the case Nature of the Cilowing connections to any dependent of the Cilowing connections to any of the following connections to any of the Address (Number, Street, City, State and ZIP Code) A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Name Address Name of accountant or bookkeeper Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued | | | |

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 38 of 51

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Is/ Carolyn West

Carolyn West

Signature of Debtor 2

Signature of Debtor 1

Date

Pebruary 2, 2018

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

No

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Monies paid for prepetition services needed to limit the financial burden of the firm.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$200.00

toward the flat fee, leaving a balance due of \$3,800.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: _ February 2, 2018_ | ar to appear in conzerve cojecu | |
|---------------------------------------|---------------------------------|--|
| Signed: | | |
| /s/ Carolyn West | /s/ Edwin L Feld | |
| Carolyn West | Edwin L Feld 6188070 | |
| | Attorney for the Debtor(s) | |
| Debtor(s) | | |
| Do not sign this agreement if the amo | ounts are blank. | |

Local Bankruptcy Form 23c

Case 18-03019 Doc 1 Filed 02/02/18 Entered 02/02/18 11:26:36 Desc Main Document Page 49 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Carolyn West | | Case No. | | |
|-------------|--|---|-----------------------------|--------------------------|----------------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPENS | SATION OF ATTO | RNEY FOR D | EBTOR(S) | |
| C | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of the debtor of the debto | of the petition in bankruptcy | , or agreed to be paid | d to me, for services re | |
| | | | | 4,000.00 | |
| | Prior to the filing of this statement I have received | | \$ | 200.00 | |
| | Balance Due | | \$ | 3,800.00 | |
| 2. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. I | I have not agreed to share the above-disclosed compen | sation with any other person | unless they are men | nbers and associates of | f my law firm. |
| [| I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | | aw firm. A |
| 5. I | n return for the above-disclosed fee, I have agreed to rend | er legal service for all aspec | ts of the bankruptcy | case, including: | |
| b c | Analysis of the debtor's financial situation, and renderir Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed] | ent of affairs and plan which | h may be required; | - | cruptcy; |
| 6. B | y agreement with the debtor(s), the above-disclosed fee de | oes not include the followin | g service: | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any analyst proceeding. | greement or arrangement for | payment to me for i | representation of the d | ebtor(s) in |
| Fe | bruary 2, 2018 | /s/ Edwin L Feld | | | |
| Do | nte | Edwin L Feld 618 Signature of Attorn Edwin L Feld & A 1 N LaSalle Stree Suite 1225 Chicago, IL 6060 | ey Associates, LLC et | | |
| | | 312-263-2100 Fa | ax: 312-263-9838 | | |

Brookwood Loans 3440 Preston Ridge Rd #100 Alpharetta, GA 30005

Cap One PO Box 30281 Salt Lake City, UT 84130

Car Max Auto Finance PO Box 440609 Kennesaw, GA 30160

CCS First Natl Bank 506 E 60th St N Sioux Falls, SD 57104

Chicago Patrolmens FCU 1359 W Washington Blvd Chicago, IL 60607

Great American Finance 20 W Wacker Dr, Suite 2275 Chicago, IL 60606

Macys PO Box 8218 Mason, OH 45040

Merrick Bank PO Box 5000 Draper, UT 84020

Opportunity Loans 1 Prudential Plaza 130 E Randolph #1650 Chicago, IL 60601

Personal Finance Mariner 5465 S 76th St Greendale, WI 53129

Santander PO Box 105255 Atlanta, GA 30348 Towne Mortgage 2170 E Big Beaver Rd A Troy, MI 48083

Webbank Fingerhut 6250 Ridgewood Saint Cloud, MN 56303